





Case No.: 97,022

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

RADA's a below named inventor, I hereby declare that:

Our residence, post office address and citizenship are as stated below next to our name.

We believe we are the original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## A SYSTEM FOR CELL-BASED SCREENING

the specification of which is attached hereto unless the following space is checked:

X was filed on as United States Application Serial Number 08/810,983.

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

We hereby appoint the following attorneys and agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

John J. McDonnell	Reg. No. 26949	Lawrence H. Aaronson	Reg. No. 35818
Daniel A. Boehnen	Reg. No. 28399	Thomas A. Fairhall	Reg. No. 34591
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Paul H. Berghoff	Reg. No. 30243	Steven J. Sarussi	Reg. No. 32784
Grantland G. Drutchas	Reg. No. 32565	Michael S. Greenfield	Reg. No. 37142
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as my Attorneys and

Patrick Halloran Reg. No. P41053

as my Registered Agent.

Address all telephone calls to (312) 913-0001.

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We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



Post Office Address:





R. Terry Dunlay Full name of first inventor: Inventor's signature: BioDx, Inc. /)
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